FEC FORM 3X

Office

Use

Only

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED_ 2013 JAN 15 PM 5: 00 FEC MAIL CENTER

FEC FORM 3X

Rev. 12/2004

			"	*		Office Use Only	
NAME OF COMMITTEE (in fi	TYPE OR PRI		xample: If typing the lines.	ng type	12FE4M5		
InfoCision M	anagement Corpo	ration PAC :	1 1 . 1 . 1 . 1	[m] 1]	1 1 1 1 1	<u> </u>	لىبىل
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ADDRESS (number and	street) 325 S	Springside Dr	ive <u>i i i</u>	<u>. 1</u> . 1 1 1 1	<u> </u>	1111	<u> </u>
Check if diffe than previous reported. (AC	sly ,		i.	No. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Lond I	44333	لسنا
2. FEC IDENTIFICA	TION NUMBER \	CITY			STATE A	ZIP CO	DE 🛦
C 0.0.4.0	7.0.9.8.	3. IS THI	1 9 6	NEW (N) OR	AN (A)	MENDED)	
July 15 Quarterl October Quarterl January Year-En July 31 Report (Year On	Report Due Coorts: y Report (Q1) y Report (Q2) 15 y Report (Q3) 31 d Report (YE) Mid-Year (Non-election iiy) (MY)	t same	Primary (12 Convention General (30	(12C)	Sep	(12S) in the	Special (30S)
5. Covering Period	10 01	2012	through	HOTAL STREET	31	2012	Character Co.
Type or Print Name of	_	David M Hamri			ue, correct a	na complete.	
Signature of Treasure	er VI		2~		Date 0	1 10	2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)	OF RECEIPTS AND DISBURSEMENTS	Page 2
Write or Type Committee Name		
InfoCision Management Corp	oration PAC	
Report Covering the Period: From:	10 01 2012 To	2012
	COLUMN A This Period	COLUMN B Calendar Yéar-to-Date
6. (a) Cash on Hand January 1, 2012.		12.492.63
(b) Cash on Hand at Beginning of Reporting Period	11,853.89	
(c) Total Receipts (from Line 19)	735.00	2,835.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	12.588.89	15,327.63
7. Total Disbursements (from Line 31)		3,088.74
Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	12,238.89	12,238,89
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		•
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		
This committee has qualified as a mu	ulticandidate committee. (see FEC FORM 1M)	
	For further information contact:	
	Federal Election Commission 999 E Street, NW Washington, DC 20463	

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts FEC Form 3X (Rev. 06/2004) Page 3 Write or Type Committee Name InfoCision Management Corporation PAC Report Covering the Period: From: To: 2012 **COLUMN A** COLUMN B I. Receipts Total This Period Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)...... (ii) Unitemized (iii) TOTAL (add 735.00 Lines 11(a)(i) and (ii).....▶ (b) Political Party Committees (c) Other Political Committees (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 2,835.00 735.00 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other Party Committees..... 13. All Loans Received 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 17. Other Federal Receipts (Dividends, Interest, etc.)..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3) (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b)).. 19. Total Receipts (add Lines 11(d). 735.00 2,835.00 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts (subtract Line 18(c) from Line 19)▶ -0-

DETAILED SUMMARY PAGE

of Disbursements FEC Form 3X (Rev. 02/2003) Page 4 COLUMN A COLUMN B II. Disbursements Total This Period Calendar Year-to-Date 21. Operating Expenditures: (a) Allocated Federal Non-Federal Activity (from Schedule H4) Federal Share (ii) Non-Federal Share...... (b) Other Federal Operating Expenditures (c) *Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .. 22. Transfers to Affiliated/Other Party 350.00 24. Independent Expenditures 26. Loan Repayments Made..... (b) Political Party Committees (c) Other Political Committees (such as PACs)..... (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).......... ▶ 29. Other Disbursements 30. Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity (from Schedule H6) (i) Federal Share (ii) "Levin" Share..... (b) Federal Election Activity Paid Entirely With Federal Funds..... (c) Total Federal Election Activity (add ... Lines 30(a)(i), 30(a)(ii) and 30(b))....▶ 31. Total Disbursements (add Lines 21(c), 22. 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 350.00 3.088.74 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	LO TOIN ON (1164. ONE 2000)	·	, ago o
331.	Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) (from Line 11(d), page 3)	735.00	2,835.00
34.	Total Contribution Refunds (from Line 28(d))		
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)		
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶		
37.	Offsets to Operating Expenditures (from Line 15, page 3)		
38.	Net Operating Expenditures (subtract Line 37 from Line 36)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check on		PAG	Ē
Any information copied from such Reports and Statements ma	ay not be sold or used by any pe	erson for the	purpose (of soliciting	<u>-</u>

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and	may not be sold or used by any ped address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
Name of Employer InfoCision Management Corp. Sr Receipt For: Aggreg	Zip Code 44262 D: 0: 4:0 : 7:0:9:8	Date of Receipt 12 31 2012 Amount of Each Receipt this Period 35.0.00
Name of Employer InfoCision Management Corp. Receipt For: Primary General Other (specify)	44281 0. 0. 4. 0. 7 0. 9. 8. [Date of Receipt 12 31 2012 Amount of Each Receipt this Period 140.00
InfoCision_Management_Corp. C	. 44505	Date of Receipt 12 31 2012 Amount of Each Receipt this Period 21.00
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only)		Carlo and control of the second secon

OF

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE OF (check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and NAME OF COMMITTEE (In Full) InfoCision Management Corporatio Full Name (Last, First, Middle Initial)	address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
A. Campbell, Wayne Mailing Address 6603 Valleyvista Drive City State Mayfield Heights OH FEC ID number of contributing	Zip Code 44124	Date of Receipt 12 31 2012 Amount of Each Receipt this Period 70.00
Name of Employer Occupation InfoCision Management Corp. Pro		
Name of Employer InfoCision Management Corp Sr. Receipt For: Aggreg	.0.0.4.0.7.0.e9	Date of Receipt 12 31 2012 Amount of Each Receipt this Period 70.00
Full Name (Last, First, Middle Initial) C. Sun, Roy Mailing Address 1227 Meadow Run City Copley FEC ID number of contributing federal political committee. Name of Employer InfoCision Management Corp. App. Aggregations App. Aggregation App. Aggregation and Aggregation and App.	Zip Code 1 44321 -0-0-4-0-7-10-9-8	Date of Receipt 12 31 2012 Amount of Each Receipt this Period 14.00
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only)		154.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE OF (check only one)
	Detailed Summary Page	11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statements r or for commercial purposes, other than using the name and		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) InfoCision Management Corporati	on PAC	
Full Name (Last, First, Middle Initial) A. Bennington, Lois Mailing Address 7447 Jimmie Street SW City State Massillon OH FEC ID number of contributing	Zip Code 44646	Date of Receipt 12 31 2012 Amount of Each Receipt this Period
Name of Employer InfoCision Management Corp. Sr. [on Data Analyst te Year-to-Date ▼ 135.00	35.00
Receipt For: Aggrega	04.0.7.0.9.8	Date of Receipt 2012 Amount of Each Receipt this Period 35.00
Full Name (Last, First, Middle Initial) C. Mailing Address City State FEC ID number of contributing	Zip Code	Date of Receipt Amount of Each Receipt this Period
Name of Employer Occupa	ate Year-to-Date ▼	Constitution of the section of the s
SUBTOTAL of Receipts This Page (optional)	An a City and a second a second and a second a second and	70.00

TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X)

SCHEDULE B (FEC Form 3X)			OF	OF		
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only o		, <u> </u>	7.65	
	Detailed Summary Page	21b 27	22 X 23		25 29	26 30b
Any information copied from such Reports and Staten	nents may not be sold or used	by any person	for the purpos	se of soliciting of	ontributio	ons
or for commercial purposes, other than using the name	ne and address of any political	committee to s	solicit contributi	ons from such (committee	е.
NAME OF COMMITTEE (In Full) InfoCision Management Corpo	ration PAC					
Full Name (Last, First, Middle Initial)	· · · · · · · · · · · · · · · · · · ·	Ţ	****			
A.			Date of Disbu	ırsement		
Slaby for State Represen Mailing Address	tative		10.	.04. 2	012	
City	State Zip Code		***************************************			
Purpose of Disbursement		- Anna Caraca			•	
				ach Disburseme		eriod
Candidate Name		Category/ Type			00.00	
Office Sought: House Disburse	ment For:	1,360	te madicus selements.	inanios raines (Liganio	ماران المساعد المساعد المساعد المساعد المساع	and the same of
Senate	Primary General					
President State: District:	Other (specify) ▼					
Full Name (Last, First, Middle Initial)	 		·			·
В.		İ	Date of Disb	ursement		
Yost for Auditor			THE WAY	. 6 4	4 5 4 5	4
Mailing Address				06 2	012	
City	State Zip Code					
Purpose of Disbursement	Т	Emiliani				
		TO A SECURE	Amount of E	ach Disbursem	ent this F	Period
Candidate Name		Category/		2	50.00	i i
Office Sought: House Disburse	ement For:	Туре	time reference from	Emailie de la la		heresidensed?
Senate	Primary General					
President State: District:	Other (specify)					
Full Name (Last, First, Middle Initial)						
C.			Date of Dis	bursement		
NA-W			HAM!		* A # A #	· ·
Mailing Address			1	Same Same	de la companya de la	Ē.
City	State Zip Code					
Purpose of Disbursement		Character The second				
Candidate Name		Coto		Each Disbursen		Period
		Category/ Type				
<u> </u>	ement For:			- A STATE OF THE PARTY OF THE P		- , em a vija 112. jb
Senate President	Primary General Other (specify) ▼					
State: District:						
SUBTOTAL of Disbursements This Page (optional)		- Construence -	3	50.00	•
			Transmission of the second	Commission of the second		ELECTRICATES
TOTAL This Period (last page this line number on	ily)	·····		Gertina San San San San San San San San San S	50.00) ************************************

DANS	Use separate schedule(s) PAGE OF	
	for each category of the Detailed Summary Page FOR LINE 13 OF	FORM 3X
ME OF COMMITTEE (In Full)		
InfoCision Management Corporation PAC		
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election:	
	General	
Mailing Address	Other (specify)	
City State ZiP	Code	
Original Amount of Loan Cumulative Payment		of This Perio
	_	
TERMS Date Incurred Date D	ue Interest Rate Se	ecured:
Date Incurred Date D	de unione transferantial	scureu.
	% (apr)	Yes N
List All Endorsers or Guarantors (if any) to Loan Source		
Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
Charles 7/D Code	Amount Guaranteed	in the same of the
City State ZIP Code	Outstanding:	Contract of the Contract of th
2. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
maning / has roos	-	
	Amount	E constitution of a
City State ZIP Code	Guaranteed Outstanding:	Similar E
3. Fuli Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	· · · · · · · · · · · · · · · · · · ·
Mailing Address	Occupation	
	Amount	an in the second
City State ZIP Code	Guaranteed Coutstanding:	. A.T.
4. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	_ :
	<u></u>	
	Amount	AND STREET,
City State ZIP Code	Amount Guaranteed Outstanding:	

SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page of Schedule (

ederal i	Election Commission, Washington, D.C. 20463			
NAME	OF COMMITTEE (In Full)		FEC	IDENTIFICATION NUMBER
	•		OWNERSON	maritan and an anti-
Inf	foCision Management Corporation PA	r. ·	C	
	IG INSTITUTION (LENDER)	Amount of Loan		Interest Rate (APR)
Full Na	•	Militali of Forth	AGRICUA PROPERTY.	turciest udie (VLU)
			Charles on the control of	%
Mailing	Address		a ru	/
		Date Incurred or Established		Constitution Constitution Constitution
City	State Zip Code	Date Due		
A.	Has loan been restructured? No Yes	If yes, date originally incurred		/ D /
ļ	If line of credit.	Total	Eronadume)	
Б.	Amount of this Draw:	Outstanding Balance:		
<u> </u>	Are about parting as an about that of a star of a t-			
C.	Are other parties secondarily liable for the debt incurr No Yes (Endorsers and guarantors m	ed? ust be reported on Schedule C.)	-	
D.	Are any of the following pledged as collateral for the	, p	What is the	value of this collateral?
	property, goods, negotiable instruments, certificates of stocks, accounts receivable, cash on deposit, or other			
	No Yes If yes, specify:	sima traditional conaterar:	i Inne linear Annual	Carlemative Track and Carle Carle
	140 1 res il yes, specily.		Daes the le	ender have a perfected security
1			Interest in	
E.	Are any future contributions or future receipts of inter		What is the	e estimated value?
-	collateral for the loan? No Yes If yes,	specify:		
ŀ		· · · · · · · · · · · · · · · · · · ·		
	A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Location of account:		
	Date account established:	Address:		
		Ohu Otata Zia		
	Frankrich Frankrich	City, State, Zip:		
F.	If neither of the types of collateral described above we the loan amount, state the basis upon which this loan			
G.	COMMITTEE TREASURER		DATE	
	Typed Name		20 26	· Francisco
	Signature		in the second	
H.	Attach a signed copy of the loan agreement.			
1.	TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the are accurate as stated above.		ation rega	rding the extension of the loan
	II. The loan was made on terms and conditions (including interest rate) no more fav	orable at t	the time than those imposed fo
	similar extensions of credit to other borrowers III. This institution is aware of the requirement that complied with the requirements set forth at 11	t a loan must be made on a basis	which ass	sures repayment, and has
AUTH	ORIZED REPRESENTATIVE		DATE	<u></u>
1 -:	d Name			n ' marche ' marchenanten
Sign	ature	Title	2000	en companiences companiences com

HEDULE D (FEC Form 3X)		separate	PAGE OF
BTS AND OBLIGATIONS	· ·	edule(s) r each	FOR LINE NUMBER: (check only one)
cluding Loans		ered line)	10
ME OF COMMITTEE (in Full)			
InfoCision Management Corporation PAC	•		
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of D	ebt (Purpose):
Mailing Address		•	
Mainty Address			
City State Zip Code			
Outstanding Balance Beginning This Period			
Emotion of a silver for a first for a firs			
Amount Incurred This Period Payment This	Period	Outstandi	ing Balance at Close of This Per
Autorit monter this i cool			und paration of Ologo or Line Los
		and soul	and the colored and the colored and the colored
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of I	Debt (Purpose):
			•
Mailing Address		1	
Taming Address		}	
City State Zip Code		1	
Amount Incurred This Period Payment This			fing Balance at Close of This Pe
		•	
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of	Debt (Purpose):
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of	Debt (Purpose):
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mailing Address		Nature of	Debt (Purpose):
Mailing Address	do	Nature of	Debt (Purpose):
·	de	Nature of	Debt (Purpose):
Mailing Address City State Zip Co	de	Nature of	Debt (Purpose):
Mailing Address	rde	Nature of	Debt (Purpose):
Mailing Address City State Zip Co Outstanding Balance Beginning This Period			
Mailing Address City State Zip Co Outstanding Balance Beginning This Period			
Mailing Address City State Zip Co Outstanding Balance Beginning This Period			
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Mailing Address City State Zip Co Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Payment This SUBTOTALS This Period This Page (optional)	s Period		

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NE OF COMMITTEE (In Full)				FEC II	·	ON NUMBER T
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nfoCision Management Corpor Check H 24-hour notice 48-hour						ina ing pangangan
Full Name (Last, First, Middle Initial) of Paye			Date	<u>!</u>		
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Mailing Address			Amo	unt	The same of the sa	E ncertrage Researche
City	State	Zip Code		and the same of		
Purpose of Expenditure		Category/	Office Sou	ght:	House	State:
Name of Federal Candidate Supported or Op	posed by Expend	iture:	1 .	Ė	President	
			Check On	e: [Support	Oppose
Calendar Year-To-Date Per Election for Office Sought			1	ent For: Other (sp	Primary	General
Full Name (Last, First, Middle Initial) of Payer	9e		Date		(Section 2)	
Martine Address						1
Mailing Address		·	Amo	ount		
City	State	Zip Code	17	in and the same	inana pangangan ga	
Purpose of Expenditure		Category/	Office So	ught:	House Senate	State: District:
Name of Federal Candidate Supported or C	pposed by Expen	diture:	Check Or	ne:	President Support	Oppose
Calendar Year-To-Date Per Election for Office Sought			·	nent For Other (s	Primary	Genera
(a) SUBTOTAL of Itemized Independent Exp	enditures		b			0
(b) SUBTOTAL of Uniternized Independent (Expenditures		··· • • • • • • • • • • • • • • • • • •		Paralia adding the	- 0-
(c) TOTAL Independent Expenditures			> 1		Name of the Control o	
Under penalty of pediury I certify that the inwith, or at the request or suggestion of, any party committee) any political party committee	candidate or auth					
		Di	ate	\	Sar., understand	having the desired on the second
Signature			210			

Aggregate General Election

Expenditure for this Candidate

SCHEDULE F (FEC Form 3X) ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S) ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE PAGE OF (2 U.S.C. §441a(d)) FOR LINE 25 OF FORM 3X (To be used only by Political Committees in the General Election) NAME OF COMMITTEE (in Full) Check if 24-hour notice InfoCision Management Corporation PAC Has your committee been designated to make Full Name of Subordinate Committee coordinated expenditures by a political party committee? YES NO If YES, name the designating committee: Mailing Address City State ZIP Code Purpose of Expenditure Full Name (Last, First, Middle Initial) of Each Payee Category/ Type Mailing Address Date Zip Code City State Name of Federal Candidate Supported Office Sought: House State: Amount District: Senate Presidential Aggregate General Election Limit Raised Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1) Expenditure for this Candidate > Purpose of Expenditure Full Name (Last, First, Middle Initial) of Each Payee Category/ Mailing Address Type Date Zip Code City State Name of Federal Candidate Supported Office Sought: House State: Amount Senate District: Presidential Aggregate General Election Limit Raised Due to Opponent's Spending (2 U.S.C. §441a(i)/441a-1) Expenditure for this Candidate Purpose of Expenditure Full Name (Last, First, Middle Initial) of Each Payee Category/ Type Mailing Address Date State Zip Code Name of Federal Candidate Supported Office Sought: House State: Amount Senate District:

Presidential

SUBTOTAL of Expenditures This Page (optional).....

TOTAL This Period (last page this line number only)......

EEO Cabadula E (Ea em 600 Day, 00/0000

Limit Raised Due to Opponent's Spend-

ing (2 U.S.C. §441a(i)/441a-1)

SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)
LICE ONLY ONE SECTION A OF B
USE ONLY ONE SECTION, A or B
A. State and Local Party Committees
Fixed Percentage (select one)
Presidential-Only Election Year (28% Federal)
Presidential and Senate Election Year (36% Federal)
Senàte-Only Election Year (21% Federal)
Non-Presidential and Non-Senate Election Year (15% Federal)
B. Separate Segregated Funds and Nonconnected Committees
Flat Minimum Federal Percentage
If the committee will allocate using the flat minimum percentage of 50% federal funds, check or
If the committee is spending more than 50% federal funds, indicate ratio below
Federal.
Nonfederal%
This ratio applies to (check all that apply):
Administrative Generic Voter Drive Public Communications Referencing Party Only

SCHEDULE H2 (FEC Form 3X) ALLOCATION RATIOS

LOCATION RATIOS		PAGE OF
AME OF COMMITTEE (In Full)		
InfoCision Management Corporation PAC		· · · · · · · · · · · · · · · · · · ·
ATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDA CTIVITIES APPEARING ON THIS REPORT.	TE SUPPORT	
ethods of allocation:		
 FUNDRAISING activities are allocated using the "funds received metre expenses must equal the federal proportion of monies raised. 	nod" where the federal pro	portion of
II. Shared DIRECT CANDIDATE SUPPORT activities are allocated accommon where the federal proportion of disbursements is based on the benefitivity. For PACs Only: Direct candidate support includes public committed and nonfederal candidates, regardless of whether there is a rare allocated using a time/space method.	it derived by federal candi- nunications or voter drives	dates from the ac- that refer to both
ACTIVITY OR EVENT IDENTIFIER		
	FEDERAL %	NONFEDERAL %
ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS: New Revised Same as Previously Reported	%	% %
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS:	6. 0. %	2 %
New Revised Same as Previously Reported ACTIVITY OR EVENT IDENTIFIER		
	FEDERAL %	NONFEDERAL %
ACTIVITY IS: Fundraising Direct Candidate Support	<u> </u>	
CHECK IF THE RATIO IS: New Revised Same as Previously Reported	And the second s	"Commented December 7
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS: Fundraising Direct Candidate Support	Samuel Committee of the Samuel	
CHECK IF THE BATIO IS:	%	Sentencia Solatoria 9
New Revised Same as Previously Reported		
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS:	Chartestan and Chartestan	Action to the second se
Fundraising Direct Candidate Support	· · · · · · · · · · · · · · · ·	0
New Revised Same as Previously Reported		
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS:	O Marie Carlot of the Carlot o	The state of the s
Fundraising Direct Candidate Support CHECK IF THE RATIO IS:	same hour commence the same same.	энин энин энин энин энин энин энин энин
New Revised Same as Previously Reported		

SCHEDULE H3 (FEC Form 3X) TRANSFERS FROM NONFEDERAL ALLOOATED FEDERAL / NONFEDE

RANSFERS FROM NONFEDERAL AC LLOOATED FEDERAL / NONFEDERA	PAGE OF	
		FOR LINE 18a OF FORM 3X
AME OF COMMITTEE (In Full)		
InfoCipion Management Compone	tion DAC	
InfoCision Management Corpora	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
	Particular A Language Control of the	
	income laconica construction	
BREAKDOWN OF TRANSFER RECEIVED		is Encountries of the contribution of the cont
i) Total Administrative		in the second of
		Long-complete contributions of secure of secure of the transfer and a secure of the se
ii) Generic Voter Drive		
		Energian en
iii) Exempt Activities		
iv) Direct Fundraising (List Activity or Event le	dentifier)	
14) Direct I all all all all all all all all all a		
	is Nega emilia sekalimgan dimendian cerulia emilia medikan	
a)	— <u> </u>	
	i Geographica de la completa de la comp	
, b)		- CONTRACTOR CONTRACTO
		in the state of th
c) Total Amount Transferred For Direct Fun	draising	
v) Direct Candidate Support (List Activity or	Event Identifier)	
	prompted by colored and colored and colored to the colored to the colored and colored to the colored and colored to the colore	Maria Maria Caracteria de Maria Caracteri de Maria Caracteria de Maria Caracteria de Maria Caracteria de M
a)	0	
b)		i n p
	reconsideration and Newsches and Alexandra	in market sometiment from the state of the sound of the s
c) Total Amount Transferred For Direct Car	ndidate Support	
vi) Public Communications Referring Only	to Party (Made by PAC)	-0
TOTALS	FOR BREAKDOWN OF TRANSFER	RECEIVED
	e minorita e negara de menor producto e minigo pero.	and from the form of the second transfer of t
TOTAL This Period (Administrative)	The second secon	and a return to the state of th
	r. Ingeneral and	the first of the state of the s
TOTAL This Period (Generic Voter Drive)	in a financia de la composition della compositio	
	generacy. Fi	in the second se
TOTAL This Period (Exempt Activities)	-	
	ion	in the first of the second production of the second production of the second se
TOTAL This Period (Direct Fundraising)		i. The second se
		Comparison Committee of Committee of Committee Committee of Committee
TOTAL This Period (Direct Candidate Support)		- O -
TOTAL This Period (Public Communications Refer	ring Only to Party)	and the second s
		Language Committee of the Committee of t
TOTAL This Period (Total Amount Transferred)		-0-

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE	0	F		
FOR LINE	21a	OF	FORM	зх

NA	ME OF COMMITTEE (In Full)	,	
	InfoCision Management Corporation PAC		Allocated Activity or Event:
A.	Full Name (Last, First, Middle Initial)		
	Mailing Address		Administrative Fundraising Exempt Voter Drive Direct Candidate Support
	City State Zip Code		Public Comm (ref to party only) by PAC
	Oity State Zip Gode		and a second control of the second control o
	Purpose of Disbursement:	Process of the second	Allocated Activity or Event Year-To-Date
	Activity or Event Identifier:	Category/ Type	Date 3
	FEDERAL SHARE + NONFEDERA		= TOTAL AMOUNT
	Contractive of Contractive meaning and the contractive	5 ,	
В.	Full Name (Last, First, Middle Initial)		Allocated Activity or Event:
	At W. Add		Administrative Fundraising Exempt
	Mailing Address		Voter Drive Direct Candidate Support
	City State Zip Code	;	Public Comm (ref to party only) by PAC
	Purpose of Disbursement:		Allocated Activity or Event Year-To-Date
	Activity or Event Identifier:	Category/	BANK/ JUNU / STAVETS
		Type	Date Continue Continu
	FEDERAL SHARE + NONFEDER	AL SHARE	= TOTAL AMOUNT
•		Line Charles	
C.	Full Name (Last, First, Middle Initial)		Allocated Activity or Event: Administrative Fundraising Exempt
	Mailing Address		Voter Drive Direct Candidate Support
	City State Zip Code	e	Public Comm (ref to party only) by PAC
	Purpose of Disbursement:	in the state of th	Allocated Activity or Event Year-To-Date
	Activity or Event Identifier:	Category/	The state of the s
		Туре	Date
	FEDERAL SHARE + NONFEDER	RAL SHARE	= TOTAL AMOUNT
	SUBTOTAL of Allocated Federal and NonFederal Activity This Page		·
•	FEDERAL SHARE + NONFEDER	RAL SHARE	= TOTAL AMOUNT
	. The state of the	ariinaminerriamenti arresi	manufacture management of the second of the
7	OTAL This Period (last page for each line only)(Federal share to 21(a)(i)	and NonFederal	share to 21(a)(ii))
	FEDERAL SHARE NONFEDER	RAL SHARE	TOTAL AMOUNT
_		ali-mail and an article and a second	The state of the s

SCHEDULE H5 (FEC Form 3X)

TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

PAGE		O	F		
FOR	LINE	18b	OF	FORM	3)

AME OF COMMITTEE (In Full)		
InfoCision Management Cor	poration PAC DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
DDS.LVDQUAL OF THE TRANSFER	isotanikyaseni: ikunaliratuni: izanyalanasisia	Terrandonessi Terrandonessa (Terrandonessa (Terrand
BREAKDOWN OF THIS TRANSFER	VOTER	REGISTRATION
i) Voter Registration	ar Docietation	in the first of th
Total Amount Transferred for Vot	er negisualion (VOTER ID
II) Voter ID	Constitution of the Consti	
Total Amount Transferred for Vol	ter ID	ii Laannidea
III) GOTV	5	GOTV
Total Amount Transferred for GC	ντν	
in Canada Campaign Antivity	•	GENERIC CAMPAIGN ACTIVITY
iv) Generic Campaign Activity Total Amount Transferred for Ge	eneric Campaign Activity	
		in manifestation of terral manifest of the material and the second secon
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
	THE PERSON NAMED IN THE PE	
	Sandana Cambrel Canadana	The state of the s
BREAKDOWN OF THIS TRANSFER		
i) Voter Registration	VOTE	R REGISTRATION
Total Amount Transferred for Vo	oter Registration	
	Egister trappings metholicarramental Astroparation	VOTER ID
ii) Voter ID Total Amount Transferred for Vo	oter ID	Figure 2 was American and Committee and Comm
, , , , , , , , , , , , , , , , , , ,	Tre-conduction	GOTV
iii) GOTV		E Sens colors all constituent de con
lotal Amount Transferred for G	OTV	. The second sec
iv) Genetic Campaign Activity		GENERIC CAMPAIGN ACTIVITY
Total Amount Transferred for G	eneric Campaign Activity	
<u> </u>		
TOTALS FOR	BREAKDOWN OF TRANSFER REC	CEIVED (Last Page Only)
		degeneration constitution and constitution of the constitution of
TOTAL This Period (Voter Registration	n)	
TOTAL This Desired (Masses ID)	Notice of the second se	
TOTAL This Period (Voter ID)	 जिन्नाम प्रीकार्य	
TOTAL This Period (GOTV)		Here was the state of the state
TOTAL THIS FEHRU (GOTV)		recent received the state of th
TOTAL This Period (Generic Campaig	an Activity)	i. Company of the second of th
Total Time Court (Control Courter)		in the second of
•		
TOTAL This Period (Total Amount of	Transfers Received)	

SCHEDULE H6 (FEC Form 3X) DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

PAGE		OF		
FOR LINE	30a	OF	FORM 3X	

NETOF COMMITTEE (In Full)	-
InfoCision Management Corporation PAC	
A. Full Name (Last, First, Middle Initial) / Full Organization Name	Type of Allocated Activity or Event:
	Voter Registration GOTV
	Voter ID Generic Camp
Mailing Address	Allocated Activity or Event Year-To-Date
	Emerge Sement's emerginary for months and the seminary of the
City State Zip Code	
Purpose of Disbursement	Category/ Date Date
FEDERAL SHARE + LEVIN	
And the second s	and a confirmation of the
Constitute	True of Allegated Activity of Events
B. Full Name (Last, First, Middle Initial) / Full Organization Name	Type of Allocated Activity or Event:
	Voter Registration GOTV Voter ID Generic Camp
Mailing Address	Allocated Activity or Event Year-To-Date
•	
City - State Zip Code	in the state of th
Purpose of Disbursement	Category/ Type Date
FEDERAL SHARE + LEVIN	SHARE = TOTAL AMOUNT
in an international literature of the colline as in an absorption and transit in an absorption and the colline as in a colline as a col	The of Allertin Action of Control
C. Full Name (Last, First, Middle Initial) / Full Organization Name	Type of Allocated Activity or Event: Voter Registration GOT
	Voter Registration GOT Generic Cam
Mailing Address	Allocated Activity or Event Year-To-Date
City State ∠ip Code	
ony one ap one	
Purpose of Disbursement	Category/ Type Date
	SHARE = TOTAL AMOUNT
	matter and a section of the section
I UBTOTAL of Shared Federal and Levin Activity This Page	
	SHARE = TOTAL AMOUNT
Amenican in the property of the second contract of the second contra	The state of the s
OTAL This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))
FEDERAL SHARE	TOTAL AMOUNT
Commission of the second secon	inversibent er seine state der seine state der seine state der seine state der seine
LEVIN	SHARE
OTAL This Period for the Levin Share	-0=
· Andrewskie Angresia (Control of the Control of th	The same that we say that a separate to the same that the

SCHEDULE L (FEC Form 3X)

AGGREGATION PAGE: LEVIN FUNDS

•	OF COMMITTEE (In Full) 1foCision Management Corpo	ration PAC	
Ξ	OF ACCOUNT		
_		COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
	RECEIPTS FROM PERSONS (a) Itemized(Use Schedule L-A)		
	(b) Unitemized		
	(c) Total		-0-
	OTHER RECEIPTS		
	TOTAL RECEIPTS(Add Lines 1c and 2)		6 3
	TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
	(a) Voter Registration	0-	2 -0-
	(b) Voter ID	0-	
	(c) GOTV		
	(d) Generic Campaign		
	(e) Total		7-0-
	OTHER DISBURSEMENTS		
	TOTAL DISBURSEMENTS(Add Lines 4e and 5)		
	BEGINNING CASH ON HAND(for Column B, use cash as of January 1st)		
	RECEIPTS		
	SUBTOTAL(Add Lines 7 and 6)		-0-
	DISBURSEMENTS(From Line 6)	No. 1	
	ENDING CASH ON HAND(Subtract Line 10 From Line 9)		

SCHEDULE L-A (FEC Form 3X) ITEMIZED RECEIPTS OF LEVIN FUNDS

PAGE OF Use separate schedule(s) FOR LINE NUMBER: for each category of the Aggregation Page (check only one) Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) InfoCision Management Corporation PAC Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt Mailing Address Amount of Each Receipt this Period City State Zip Code Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt В. Mailing Address Amount of Each Receipt this Period State City Zip Code Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt C. Mailing Address Amount of Each Receipt this Period Zip Code City State Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation . Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt D. Mailing Address Amount of Each Receipt this Period City State Zip Code Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

Use separate schedule(s) for each category of the Aggregation Page

FOR LINE NUMBER: PAGE OF (check only one) 4a 4c 5 4d 4d

F LEVIN FUNDS	Aggregatier rago	
Any information copied from such Reports or for commercial purposes, other than us	and Statements may not be sold or used by a sing the name and address of any political com-	any person for the purpose of soliciting contributions mittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
InfoCision Managemen	· · · · · · · · · · · · · · · · · · ·	
Full Name (Last, First, Middle Initial) /	Full Organization Name	Date of Disbursement
••		THE A POST A CARACTA
Mailing Address		incontinued nomination and incomination
City	State Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		
Full Name (Last, First, Middle Initial) /	Full Organization Name	
3.		Date of Disbursement
Mailing Address		THE ME TO THE TENT OF THE TENT
City	State Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		
Full Name (Last, First, Middle Initial)	/ Full Organization Name	
C.		Date of Disbursement
Mailing Address		R W / C P D / V T V E V
City	State Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		in a survivor and the continue of the continue
Full Name (Last, First, Middle Initial)	/ Full Organization Name	Date of Disbursement
.		/ S D = U / ! Y ! Y ! Y ! Y ! Y ! Y ! Y ! Y ! Y !
Mailing Address		Transcription and Superior Control of Contro
City	State Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		
Full Name (Last, First, Middle Initial) E.	/ Full Organization Name	Date of Disbursement
Mailing Address		The state of the s
City	State Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Contracting and the contraction of the contraction
SUBTOTAL of Disbursements This Pa	ge (optional)	promote the second seco
		James and Service of Proposition for an analysis for the Proposition of the Proposition o
TOTAL This Period (last page this line	number only)	········ > ······· = 0 - · · · · · · · · · · · · · · · · · ·

Month	Donor	Amt						
October	Lois Bennington	10.00	InfoCision PAC Filin	ig - Oct - E	Dec 2012			
October	Steve Brubaker	100.00	Employee Contribut	Employee Contribution Summary				
October	Wayne Campbell	20.00						
October	Fred Kingsbury	20.00	Sum of Amt		October -	December T	otal	
October	Tina Parker	6.00	Donor	October	November	December	Grand Total	
October	Diane Rothrock	10.00	Lois Bennington	10.00	10.00	15.00	35.00	
October	Roy Sun	4.00	Steve Brubaker	100.00	100,00	150.00	350.00	
October	Andrew L Talabac	40.00	Wayne Campbell	20.00	20.00	30.00	70.00	
November	Lois Bennington	10.00	Fred Kingsbury	20.00	20:00	30.00	70.00	
November	Steve Brubaker	100.00	Tina Parker	6.00	6.00	9.00	21.00	
November	Wayne Campbell	20.00	Diane Rothrock	10.00	10.00	1 5 .00	35.00	
November	Fred Kingsbury	20.00	Roy Sun	4.00	4.00	6.00	14.00	
November	Tina Parker	6.00	Andrew L Talabac	40.00	40.00	60(00	140.00	
November	Diane Rothrock	10.00	Grand Total	210.00	210.00	315.00	735.00	
November	Roy Sun	4.00						
November	Andrew L Talabac	40.00						
December	Lois Bennington	15.00	Sum of Amt			January - D	ec Total	
December	Steve Brubaker	150.00	Donor	QTR 1	QTR 2	QTR 3	QTR 4	Grand Total
December	Wayne Campbell	30.00	Lois Bennington	35.00	30.00	35.00	35.00	135.00
December	Fred Kingsbury	30.00	Steve Brubaker	350.00	300.00	350.00	350.00	1,350.00
December	Tina Parker	9.00	Wayne Campbell	70.00	60.00	70.00	70.00	270.00
December	Diane Rothrock	15.00	Fred Kingsbury	70.00	60.00	70.00	70.00	270.00
December	Roy Sun	6.00	Tina Parker	21.00	18.00	2).00	21.00	81.00
December	Andrew L Talabac	60.00	Diane Rothrock	35.00	30.00	30.00	85.00	135.00
			Roy Sun	14.00	12.00	14.00	14.00	54.00
	Total	735.00	Andrew L Talabac	140.00	120.00	140.00	140.00	540.00
			Grand Total	735.00	630.00	735.00	735.00	2,835.00

12/0/12

INFOCISION MANAGEMENT CORP. PAC ACCOUNT 325 SPRINGSIDE DR AKRON, OH 44333

PAY TO THE ORDER OF_

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DOLLARS 🛈

\$ 250 00

DATE 12-6-18

FIRSTMERIT Tower Office

www.firstmerit.com

INFOCISION MANAGEMENT GORP PAC ACCOUNT 325 SPRINGSIDE DR AKRON, OH 44333

DATE 10-4-14

PAYTOTHE ORDER OF Slaby to State Representative One humdeld do law 100

DOLLARS D

1001

FIRSTMERIT Tower Office

www.firstmerit.com

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt Hand Delivered Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark Shipping, Date Red Ex Overnight Delivery Service (Specify): Next Business Day Delivery **Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): DATE PREPARED PREPARER

(3/2005)